

BUILDING A SUSTAINABLE STI PROGRAM

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REGION III

**STD & RELATED REPRODUCTIVE HEALTH
TRAINING & TECHNICAL ASSISTANCE
CENTER**

SUSTAINABILITY

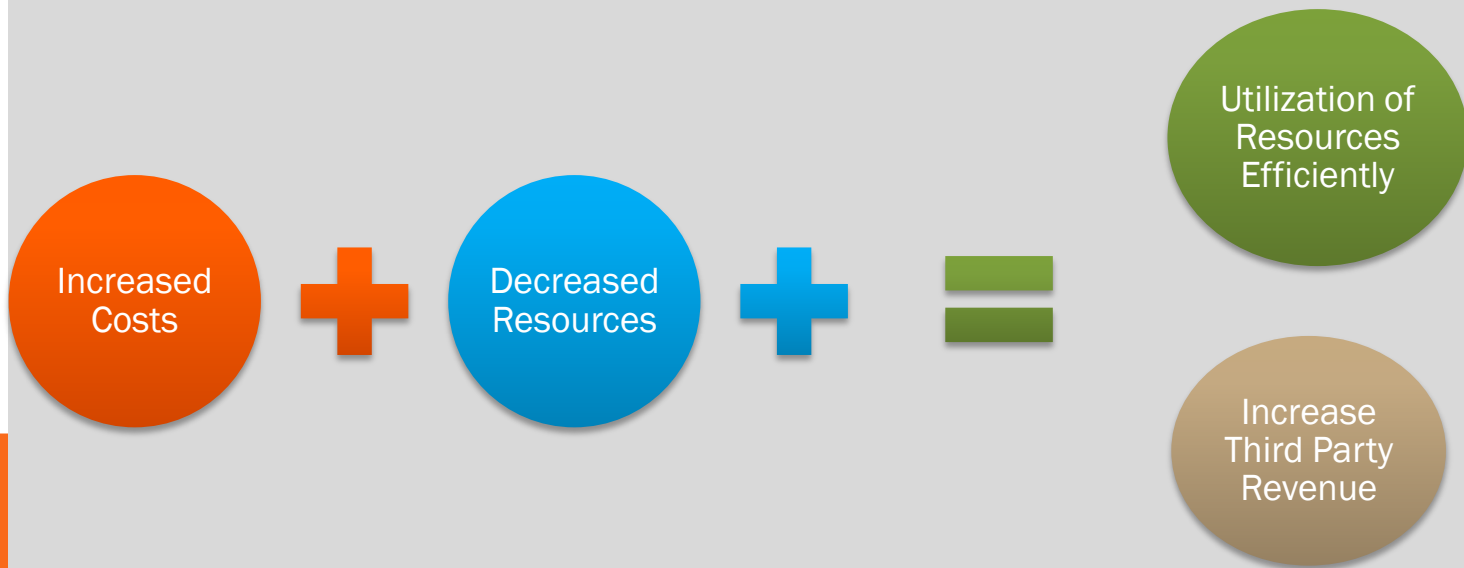
Describe practices that contribute to a sustainable clinic.

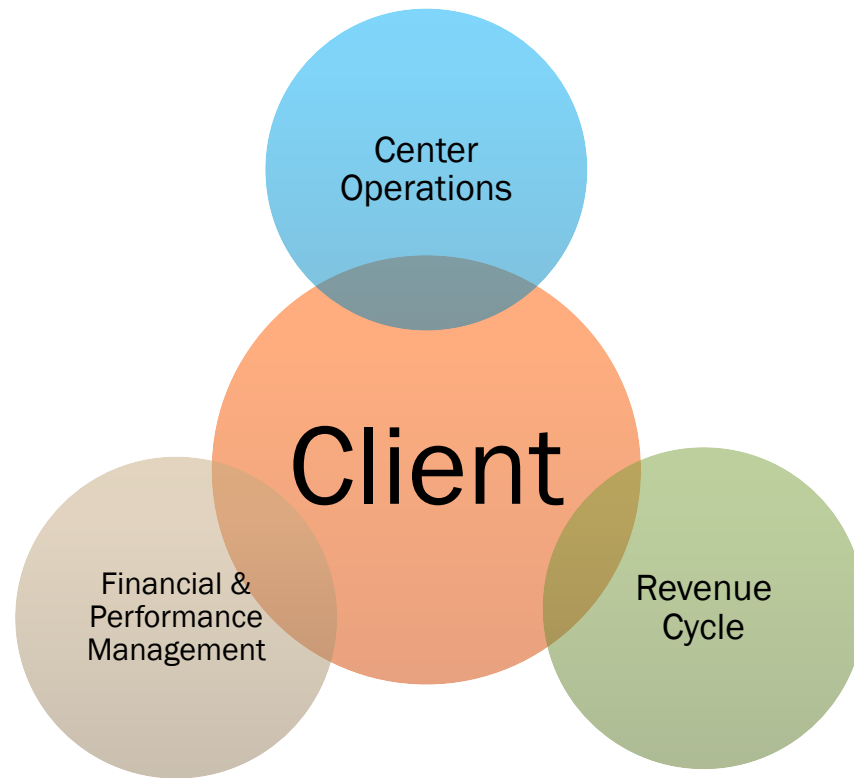




**WHAT DOES IT MEAN TO
HAVE A SUSTAINABLE
CLINIC/PROGRAM?**

REALITY OF CLINIC SUSTAINABILITY






ASSESSMENT OF OPERATIONS



BEST PRACTICES

WHAT DO PATIENTS WANT?

- ✓ Timely Appointments
 - ✓ Short Cycle Time
 - ✓ Positive Relationship with Clinic Staff
 - Accurate
 - Timely Communication
 - ✓ Quality Care
- 

Center Operations

Hours of
Operation and
Staffing Mix

Number of
Patient Served

Staff working
at the top of
their training
or license
(Staff
Management)

Patient access
to services
(Appointment
Scheduling)

Patient Time
in Clinic-
Contact and
Wait Time
(Workflow)

Utilization of
Evidence
Based
Practices

Appointment Scheduling Best Practices

- ✓ Use a consistent stream of appointments throughout the day.
- ✓ Reduce schedule complexity
- ✓ Reduce scheduling restrictions
- ✓ Reduce appointment type variability
 - Standardize appointment type/length
 - Average clinician time per visit
- ✓ Develop policy for late and early patients
- ✓ Limit availability of schedule
 - Don't schedule too far out

Workflow and Staff Management Best Practices

- ✓ Visit cycle time such that staff contact time is more than patient waiting time
- ✓ Reduce Hand-offs between staff (combine steps)
- ✓ Bring services to the client
- ✓ Reduce duplication
- ✓ Standardize process
- ✓ Manage interruptions
- ✓ Cross-training and task shifting
- ✓ Staff Schedules (start, end, breaks when resources are needed)
- ✓ Staff Huddles

Financial and Performance Management

Users and
Visits

Cycle Time


Clinician
Productivity

Screening
Coverage

Expense
and
Revenue
Budget
Monitoring

Financial
Statement
Ratio
Analysis

FINANCIAL AND PERFORMANCE MANAGEMENT BEST PRACTICES

- ✓ Costs Analysis
 - ✓ Data Dashboards
 - ✓ Use existing data
 - ✓ Average clinician visits per FTE
 - ✓ FPAR (1800 to 2100)
 - ✓ FQHCS (2500 – 2800)
 - ✓ Monthly budget reports with variance analysis
- 



REVENUE CYCLE MANAGEMENT

REVENUE CYCLE MANAGEMENT

All administrative and clinical functions that contribute to the capture, management and collection of patient revenue.

Clinically Driven Revenue Cycle



APRIL 2013 NASTAD SURVEY

CHALLENGES TO THIRD PARTY BILLING & REIMBURSEMENT

Program staff lack knowledge about billing and reimbursement

Health Departments lack IT infrastructure

Program lacks capacity to support providers in implementation

A majority of clients do not have insurance



CHALLENGES TO THIRD PARTY BILLING & REIMBURSEMENT

Non clinical services are not reimbursable

Difficulty contracting with third-party payers

Confidentiality/ privacy concerns- EOB

Provides lack capacity to follow-up on unpaid bills



TRAINING 3 SURVEY OF REGION III 2012

BARRIERS

Policies

“As a State Health Department, all the revenue will go into a **general fund and not back to our clinic.”**

““Our clients want confidential services and EOBS are sent home if they use their insurance.”



BARRIERS

Systems and Capacity

“We have no expertise to ensure appropriate billing/coding/reimbursement.”

“We do not have the hardware, software or internet access that we need.”

“We do not have enough trained staff.”



BARRIERS

Systems and Capacity

“We do not know how to relate to third party payers.”

“What is Revenue Cycle Management?”

“How do we handle Credentialing?”

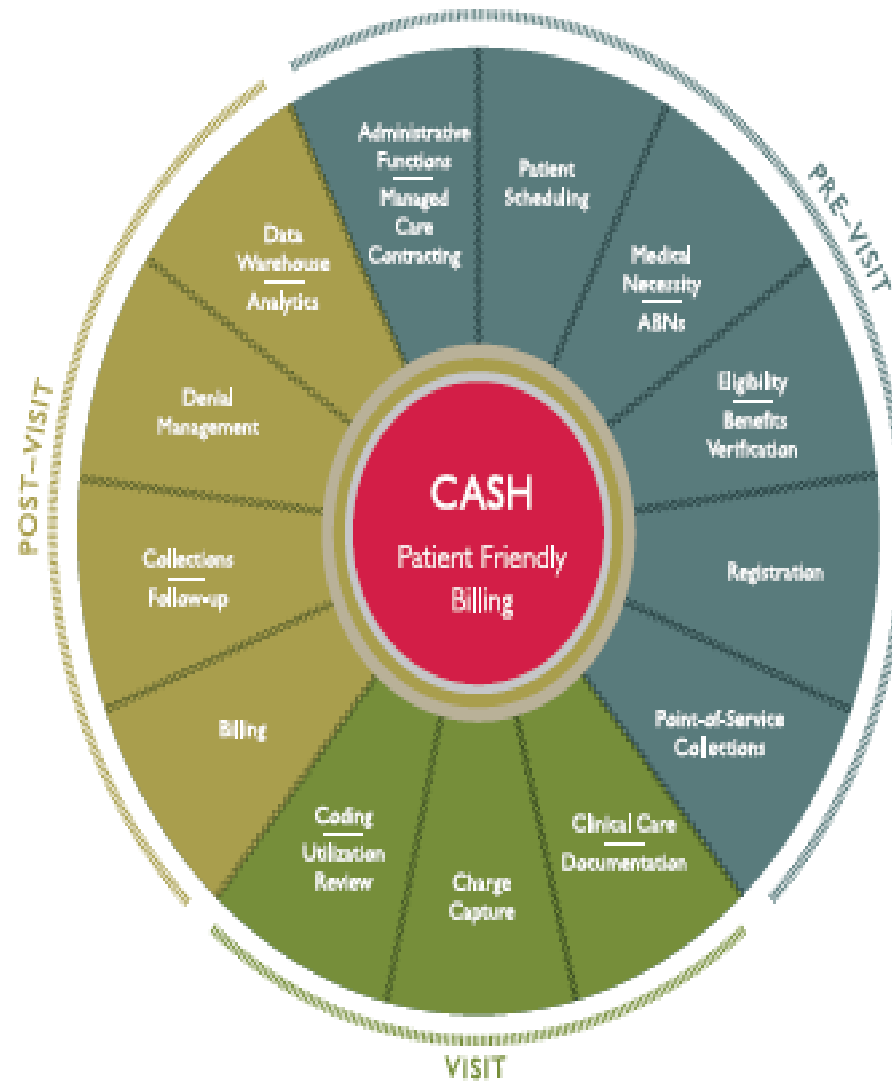




“We just do not know
where to start.”



Clinically Driven Revenue Cycle



Revenue Cycle

Processing
Patient
Information

Insurance
Verification

Documentation
of Visit - Coding

Creation and
Submission of
Claim

Account
Receivable
Management –
Denial
Management

QUESTIONS TO CONSIDER

Who are the major insurers in your service area that your clients may utilize?

What is the contracting process for each insurance company?

Are you going to use a billing company

In-House Considerations:

What are the billing systems that are needed? How do you select one to begin?




QUESTIONS TO CONSIDER

**What will the Revenue Cycle Look Like at the Clinic?
Are you going to use a clearinghouse?**


What Are The New Roles and Responsibilities for Staff?



REVENUE CYCLE BEST PRACTICES

- ✓ Understand you payer mix
 - ✓ Check insurance status on all clients prior to their visit
 - ✓ Discuss fees and insurance eligibility with client
 - ✓ Conduct chart audits to insure that documentation supports coding
 - ✓ Prepare for ICD-10
- 

REVENUE CYCLE BEST PRACTICES

- ✓ Keep fee schedules up to date
 - ✓ Insure quality of claims
 - ✓ Manual Review
 - ✓ Use Scrubbers or edits at all stages
 - ✓ Submit claims electronically
 - ✓ Insure quality of uploads
 - ✓ Process claims daily
 - ✓ Manage your AR in a timely fashion
 - ✓ Establish relationships with your insurance rep
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DO NOT REINVENT THE WHEEL



WE ARE HERE TO HELP



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